

Division of Health Licensing

County: Lee

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
BISHOPVILLE MANOR 2779 HWY 15 N BISHOPVILLE, SC 29010-7101 FAC.#:803-428-2222 MINUS, KATHY L PH#: Facility Email: RICKIE.TILLEA@CTP-CPA.COM	Lee / Corporation PO BOX 312 BISHOPVILLE, SC 29010-0312 BISHOPVILLE MANOR INC CRC-1108 / 06/30/2013 (Renewal Pending)	44
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
COTTONWOOD VILLAS 800 W CHURCH ST BISHOPVILLE, SC 29010-1054 FAC.#:803-484-5303 SHEALY, HARRIETT H PH#: 803-484-5303 Facility Email: FGAINNEY@COOKE-ASSOCIATES.COM	Lee / Corporation 800 W CHURCH ST BISHOPVILLE, SC 29010-1054 COTTONWOOD VILLAS INC CRC-1186 / 10/31/2014	71
Alzheimer Care:Yes Max # Resident:3	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
EMERALD RCF I 2244 BROWNTOWN RD BISHOPVILLE, SC 29010-9664 FAC.#:803-428-5407 FORTUNE, ELLA R PH#: 803-428-5407 Facility Email: ERF03@SCDMH.ORG	Lee / State 2244 BROWNTOWN RD BISHOPVILLE, SC 29010-9664 SANTEE-WATEREE COMMUNITY MENTAL HEALTH CENTER CRC-1205 / 04/30/2014	5
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
EMERALD RCF II 2262 BROWNTOWN RD BISHOPVILLE, SC 29010-9664 FAC.#:803-428-5407 FORTUNE, ELLA R PH#: 803-428-6044 Facility Email: ERF03@SCDMH.ORG	Lee / State 2262 BROWNTOWN RD BISHOPVILLE, SC 29010-9664 SANTEE-WATEREE COMMUNITY MENTAL HEALTH CENTER CRC-1206 / 04/30/2014	5
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
TERRACE 230 S HEYWARD ST BISHOPVILLE, SC 29010-1022 FAC.#:803-692-6003 GAINNEY, FELECIA H PH#: 803-692-6003 Facility Email: JEKOSR@YAHOO.COM	Lee / Limited Liability 230 S HEYWARD ST BISHOPVILLE, SC 29010-1022 TERRACE CRCF LLC CRC-1535 / 08/30/2014	5
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

Totals For Facility/License Type: Community Residential Care FacilityNumber of Activities/Facilities licensed: 5 Number Licensed Units: 130

Division of Health Licensing

County: Lee

Facility Type: Habilitation R15

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
MCLEOD I GROUP HOME 808 MCLEOD RD BISHOPVILLE, SC 29010-1100 FAC.#:803-484-9473 WOODS, LEROY J PH#: 803-484-6987 Facility Email: MMACK@LCDSN.ORG	Lee / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0210 / 06/30/2014	8
MCLEOD II GROUP HOME 814 MCLEOD RD BISHOPVILLE, SC 29010-1100 FAC.#:803-484-9473 WOODS, LEROY J PH#: 803-484-6995 Facility Email: MMACK@LCDSN.ORG	Lee / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0211 / 06/30/2014	8

Totals For Facility/License Type: Habilitation R15Number of Activities/Facilities licensed: 2 Number Licensed Units: 16

Division of Health Licensing

County: Lee

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

LEE CORRECTIONAL INSTITUTION INFIRMARY	Lee / State	20
1204 E CHURCH ST	PO BOX 210382, SCDOC-ACCOUNTS PAYABLE	
BISHOPVILLE, SC 29010-2021 FAC.#:803-896-2400	COLUMBIA, SC 29221-0382	
MCDONALD, YVONNE PH#: 803-896-2400	SC DEPT OF CORRECTIONS	
Facility Email: Not on File	HTL-0873 / 03/31/2014	

Licensed Beds: General: 20	Psychiatric: 0	Rehab: 0	Substance Abuse: 0
Other Beds : NICU: 0	Neonatal Special Care: 0		

Certifications:None

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 20

County: Lee

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
MCCOY MEMORIAL NURSING CENTER 207 CHAPPELL DR BISHOPVILLE, SC 29010-1167 FAC.#:803-484-5636 MOORE, JOHN D PH#: 803-484-5636 Facility Email: JMOORE@COOKE-ASSOCIATES.COM	Lee / Ltd. Liability 207 CHAPPELL DR BISHOPVILLE, SC 29010-1167 COOKE ASSOCIATES OF BISHOPVILLE LLC NCF-0940 / 12/31/2013	120

Licensed Beds: Nursing Home: 120 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

Totals For Facility/License Type: Nursing HomeNumber of Activities/Facilities licensed: 1 Number Licensed Units: 120

County: Lee

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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FRESENIUS MEDICAL CARE LEE COUNTY	Lee / Corporation	21
289 FAIRVIEW AVE STE B	289 FAIRVIEW AVE STE B	
BISHOPVILLE, SC 29010-1513 FAC.#:803-484-5972	BISHOPVILLE, SC 29010-1513	
ROGERS, MARIE PH#: 803-484-5972	BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC	
Facility Email: Not on File	ERD-0175 / 05/31/2014	

Licensed Stations: Hemodialysis: 21 Peritoneal: 0

Totals For Facility/License Type: Renal DialysisNumber of Activities/Facilities licensed: 1 Number Licensed Units: 21

Number of Activities/Facilities licensed in county of	<u>Lee</u>	# Lics: <u>10</u>
	Number Licensed Units :	<u>307</u>

Report Totals

Total Number of Activities/Facilities licensed 10 Total Number Licensed Units: 307